

# 2020 Congressional Art Competition

## Student Information & Release Form

PLEASE PRINT CLEARLY. THIS INFORMATION IS USED FOR CERTIFICATES AND AWARDING SCHOLARSHIPS.  
INCOMPLETE FORMS WILL NOT BE ACCEPTED.

MEMBER/DISTRICT INFORMATION	
MEMBER OF CONGRESS NAME:	STATE & DISTRICT:

STUDENT INFORMATION		
NAME: <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.		GRADE:
STREET ADDRESS:		
CITY:	STATE:	ZIP:
MAILING ADDRESS (IF DIFFERENT):		
STUDENT EMAIL:	STUDENT PHONE (CELL):	
PARENT OR GUARDIAN NAME(S):		
PARENT PHONE (HOME):	PARENT PHONE (WORK or CELL):	
PARENT EMAIL:	STUDENT T-SHIRT SIZE:	

SCHOOL		
SCHOOL NAME:		
STREET ADDRESS:		
CITY:	STATE:	ZIP:
ART TEACHER NAME:		
ART TEACHER PHONE:	ART TEACHER EMAIL:	

ART COMPETITION ENTRY	
TITLE OF ENTRY:	
MEDIUM:	
DESCRIPTION:	
Please include a detailed description of the artwork, clearly identifying the major elements of the piece.	
For office use only:	
FRAMED DIMENSIONS: Height: _____ inches Width: _____ inches Depth: _____ inches	
See official guidelines for framed size and artwork weight restrictions.	

PLEASE COMPLETE THE RELEASE FORM ON PAGE 2.

# 2020 Congressional Art Competition

## Student Information & Release Form

(CONTINUED FROM PAGE 1)

STUDENT NAME:

STATE & DISTRICT:

TITLE OF ENTRY:

### ORIGINALITY CERTIFICATION

I hereby certify that, to the best of my knowledge, the art entry described above is an original work of authorship by the undersigned student and that it is not copied from, nor does it include, any other person's copyrighted work.

STUDENT SIGNATURE

ART TEACHER SIGNATURE

### ARTWORK RELEASE

We, the undersigned, represent that the art entry described above is an original work of authorship personally created by the undersigned student to which the student is entitled copyright protection. In consideration for the acceptance of the art entry by the Member of Congress designated above in *An Artistic Discovery* (the Congressional Art Competition sponsored by the U.S. House of Representatives) and intending to be legally bound hereby, the undersigned grant the Member and the House the right to publicly display the art entry, if it is selected for display, in accordance with the rules of the Art Competition. The undersigned grant the Member, the House, their employees and agents, the United States, and the Congressional Institute, Inc., and its employees, the right to reproduce the art entry for any non-commercial purpose. The undersigned further release the Member, the House, their employees and agents, the United States, and the Congressional Institute, Inc., and its employees, from any and all liability for damage, loss, or misappropriation of the art entry during and subsequent to the Art Competition. The undersigned further agrees to indemnify, hold harmless and defend the Member, the House, their employees and agents, the United States, and the Congressional Institute, Inc., and its employees, against any and all claims of any nature whatsoever, including, but not limited to, claims of copyright infringement, by any party whatsoever, arising out of or in any way related to the submission of the art entry in the Art Competition.

STUDENT SIGNATURE

PARENT/GUARDIAN SIGNATURE (IF UNDER 18)

Elaine Luria

2<sup>nd</sup> District, Virginia

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COMMITTEE ON  
House Committee on Veterans' Affairs  
House Armed Services Committee

**Congress of the United States**  
**House of Representatives**  
**Washington, DC 20515-4603**

WASHINGTON  
534 Cannon House Office Building  
Washington, DC 20515

DISTRICT  
One Columbus Center, Suite 900  
283 Constitution Drive  
Virginia Beach, VA 23462

<https://luria.house.gov>

## Permission to Publish Photo and/or Quotation

Congresswoman Luria makes it a priority in constituent communications and on social media to highlight constituents her office has been able to assist. This helps other constituents know that help with federal agencies is available. Our office will only use as much information as you are comfortable with and is happy to work with you to find that balance. We thank you for your willingness to be featured on social media and/or in a constituent communication. By signing this form, you agree to let Representative Elaine Luria publish a photograph of you and/or quotation attributed to you.

Name: \_\_\_\_\_

Quote:

I certify that:

- ☐ I am a US Citizen;
- ☐ I am a resident of Virginia's Second Congressional District;
- ☐ I have not been convicted of a crime; and
- ☐ I have not been compensated for this testimony.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Authorization and Release – Minor Under the Age of Eighteen**

I, the undersigned, am the parent or guardian of \_\_\_\_\_ (“Child”). I hereby authorize U.S. Representative \_\_\_\_\_ (the “Member”), to use for any purpose relating to her official duties, including in printed materials for distribution, my Child’s voice, portrait, picture, color or black and white photograph, videotaped image, audiovisual and/or any other reproduction of my Child (collectively, the “Image”). I further authorize the use of my Child’s name in conjunction with the Member’s use of the Image, as well as the use of any oral or written statements made by Child (“Statements”), for any purpose relating to the Member’s official duties, which Statements may be attributed to my Child by name or otherwise. I waive any right I may have to inspect or approve the use of the Image or Statements by the Member. I understand that the Member may use the Image or Statements, in whole or in part, in media or other technologies for worldwide distribution, and I grant my authorization for such use. I also understand that the Member is under no obligation to use the Image or Statements for any purpose, and that I and/or my Child shall receive no compensation for the use of the Image or Statements by the Member.

I hereby release and hold harmless the Member, the U.S. House of Representatives, their employees and agents, and the United States from any and all liability for any and all claims arising out of or relating to the use of the Image or Statements.

I have read and understand the terms listed above.

By:

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Signature of Parent/Guardian

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Printed Name of Parent/Guardian

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Date